

Title: Management Self-Assessments**1.0 Purpose**

This procedure establishes the methodology by which managers will assess their work processes, systems, and programs to define problem areas and to improve performance. The Jefferson Lab Quality Assurance Program Manual requires a Management Self-Assessment (MSA) program. MSAs are Integrated Safety Management System tools for improvement and provide an important feedback mechanism that furnishes management with needed information to evaluate and improve any aspect of the organization or the Lab missions.

For you as a manager an MSA is an opportunity to:

- Identify the gaps between where you are and where you want to be.
- Identify the reasons for the gaps.
- Identify the actions that will be taken to close the gaps (corrective actions).
- Close the gaps between where you are and where you want to be.
- Verify that corrective actions have been effective and lasting.

SURA/DOE Contract provisions (see Clauses I.83, H.32 and I.74) as well as the Lab's ISMS Program Plan (section II.C(5)) require an effective assessment program. This procedure addresses that requirement by defining a procedure for conducting the Management self-assessment component of the assessment program.

2.0 Scope/Applicability

This procedure applies to all Divisions and Offices.

3.0 Responsibilities**3.1 The Laboratory Director:**

- 3.1.1** Approve the annual Integrated Assessment Schedule (IAS).

3.2 Associate Directors and the Laboratory Director:

- 3.2.1** Determine the effectiveness of ongoing activities in their divisions by ensuring that MSAs are accomplished appropriately.
- 3.2.2** Review the status and results of MSAs with the responsible managers; include assessment quality and the status of follow-up activities.
- 3.2.3** Provide guidance and assistance to the responsible managers during the planning phase of assigned assessments.
- 3.2.4** Assign a manager to perform the MSA. Ensure personnel assigned as lead assessors are trained in the management assessment process and are knowledgeable of the program, system or process being assessed.
- 3.2.5** At least quarterly, review the status and results of the Division's MSAs at Director's Safety Council.

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- 3.2.6** Ensure that results of the Division's MSAs are shared with other Laboratory groups that may find them useful.
- 3.2.7** By September 1 of each year develop and submit to the Office of Performance Assurance (OPA) a divisional MSA schedule for the coming fiscal year. This schedule will be included in the Lab's Integrated Assessment Schedule, which is approved by the Director. The division schedule should be based on the MSA topics issued by OPA and the needs of the division. In developing the schedule consider previous MSAs, independent assessments, risk, trend analysis, external audits, occurrence reports, and any other performance feedback mechanisms. The schedule should distribute the MSAs throughout the year. Ensure that the highest risk processes, systems, operations, programs, and details receive appropriate attention. Provisions may be made in the assessment schedule for unscheduled or responsive assessments. This allows greater flexibility to perform or assign assessments that will result in the greatest opportunity for improvement. See Attachment A for a scheduling checklist and Attachment B for the template to be used for reporting divisional schedules to OPA.
- 3.2.8** Maintain overall responsibility for the planning and performance of MSAs in accordance with the Integrated Assessment Schedule. Ensure MSA reports under his/her cognizance clearly indicate any required follow up actions, dates, and responsibilities.
- 3.2.9** Ensure Findings and Observations/Opportunities for Improvement are entered into the Corrective Action Tracking System (CATS) for tracking any follow up actions identified.
- 3.2.10** Approve all completed MSAs. Upon completion of the Associate Director's review, forward the completed MSA Report to the OPA.
- 3.3** The Office of Performance Assurance Manager:
- 3.3.1** By August 15 of each year provide division management with a list of MSA topics for the coming year. These topics are to be considered when the divisions create their MSA schedule.
- 3.3.2** Prepare the Integrated Assessment Schedule for Director approval and signature. This schedule combines the schedule for Independent Assessments and the division MSA schedules.
- 3.3.3** At least quarterly, perform trend analysis on assessment-identified items tracked in the Corrective Action Tracking System and report the results of this trend analysis to the Director's Safety Council. Trend analysis will include risk assessment.
- 3.3.4** Review the submitted MSA reports for quality, comprehensiveness and credibility and provide the appropriate endorsement.

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- 3.3.5 On a semi-annual basis, evaluate the Independent Assessment and Management Assessment programs to determine the balance and application of each type needed to ensure the assessments improve and add value to the organization. Report results to the Associate Directors in time for their annual review of the schedule.
- 3.3.6 Periodically perform an independent assessment of the MSA program.
- 3.3.7 Maintain the completed MSA Reports on file; make available on the web.
- 3.3.8 Provide electronic copies of the completed reports to the following:
- PAAA Coordinator,
 - Lessons Learned Coordinator,
 - Laboratory Staff directly involved with an assessment.
- 3.4 Lead assessor assigned to conduct an MSA:
- 3.4.1 Familiarize themselves with the contents of this procedure.
- 3.4.2 Plan the MSA using Attachments C and D as guides and document the results in an assessment plan. The plan should address the following: description of areas, processes, and procedures to be evaluated; evaluation tools and performance measures to be used; identification of the team leader and members; planned start and completion dates, including issuance of report. Team members may participate in planning.
- 3.4.3 Conduct the MSA and report results in accordance with Attachment F. Submit the MSA report for review and approval. Include any assessment planning documentation (Attachment C as a minimum). Ensure findings and observations/opportunities for improvement are entered into CATS and include the CATS sequence numbers in the report.

4.0 Process

- 4.1 Six repeating steps describe the MSA process: **Schedule, Plan, Perform, Report, Follow-up and Feedback.**
- 4.2 **Schedule** The schedule for MSAs is documented in the Lab's Integrated Assessment Schedule (IAS). The IAS schedules MSAs by quarter; the divisions develop the detailed schedules to ensure that the MSAs are completed as required by the IAS.
- 4.3 **Plan** MSAs using Attachment C, *MSA Plan Template* and Attachment D, *Planning Checklist*, as a guide. The completed plan for each MSA shall be submitted and maintained with the completed assessment. The Office of Performance Assurance will maintain a log of MSAs and assign a unique number to each. This number should be obtained when the planning phase is initiated.

Typically an MSA is not a "wall-to-wall" assessment - it is a sampling of the organization's performance in an area. For example, a manager planning an MSA of PPE

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usage could choose one, or perhaps a few tasks, to observe for PPE usage. To best drive improvement the sample would include tasks that the manager suspects could be problem areas.

4.4 Perform MSAs in accordance with the documented plan.

4.4.1 An individual or a team may perform MSAs.

4.4.2 The manager may delegate some aspects of the MSA process, such as data collection; however, the assigned manager must ensure the assessment is conducted according to this procedure.

4.4.3 Attachment D, *MSA Performance Checklist*, is a guide for the manager to help him maximize the benefits of the assessment.

4.5 Report the results in accordance with the format of Attachment F, *MSA Report Template*.

4.5.1 Items requiring corrective action will be documented on Attachment G, *MSA Corrective Action Form*. The form will be used to enter the items into CATS. The Division may enter the items into CATS or request that OPA do it. Copies should be included with the final report.

4.5.2 Items requiring follow-up activities shall be entered into CATS for traceability of issues identified in the assessment process and corrective actions implemented to correct or improve performance.

4.5.3 All management assessment reports shall be reviewed by all managers in the management chain above the manager performing the assessment up through the Associate Director.

4.6 Follow-up the MSAs as necessary to ensure effective corrective action has occurred. The reporting process requires the identification of follow-up activities. Follow-up actions will be assigned dates and a responsible individual via CATS. Follow-up actions for MSAs may include performance of another MSA, inclusion of assessed areas in a future independent assessment, and/or evaluation of subsequent performance indicators.

4.7 Provide **Feedback**, as appropriate, to the organization assessed. The assessment report is one form of feedback, but one-on-ones, department meetings, *etc.* may also be used to feed back MSA results.

4.8 Issues identified in MSAs should be a focus of management walkarounds, safety inspections, *etc.* just as the results of these inspections should suggest topics for future MSAs.

5.0 References

Jefferson Lab Quality Program Manual

6.0 Abbreviations/Acronyms

Management Self Assessment Procedure

Rev 3.1

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CATS: Corrective Action Tracking System

IAS: Integrated Assessment Schedule

MSA: Management Self-Assessment

OPA: Office of Performance Assurance

7.0 Attachments

Attachment A - Checklist for Scheduling MSAs

Attachment B - Division MSA Schedule and Log

Attachment C - MSA Assessment Plan Template

Attachment D - MSA Planning Checklist

Attachment E - MSA Questions

Attachment F - MSA Report Template

Attachment G - MSA Corrective Action Form

ATTACHMENT A

CHECKLIST for SCHEDULING MSAs

1. Choose division's MSA topics:
 - 1.1. Review list of MSA topics issued by the Office of Performance Assurance (OPA). These topics should be scheduled unless they are inappropriate. (For example, if no one in the Division does lock, tag and try, then an MSA of that program would be inappropriate.)
 - 1.2. Review risk of division processes, systems and programs to the Lab. Evaluate the risk in terms of potential and likelihood of negative impact on health, safety, the environment, quality, and production (schedule and cost). High-risk issues should be assessed.
 - 1.3. Consider recent assessment results from independent and third-party assessments.
 - 1.4. Review results from previous MSAs.
 - 1.5. Consider problem areas at other DOE sites. Contact OPA for information and assistance.
 - 1.6. Review performance indicators including Appendix B metrics.
 - 1.7. Consider other sources to identify MSA topics
2. Decide which departments/groups will assess each topic and assign a lead assessor.
3. Consider scheduling reactive assessments with no topic assigned to enable managers to address issues as they arise or as trends indicate a need.
4. Decide when each assessment will be done. Scheduling by quarter is sufficient. Schedule should distribute assessments throughout the year.
5. Complete Attachment B, Division MSA Schedule.
6. Submit Division MSA schedule to OPA before September 1.

ATTACHMENT B

DIVISION MSA SCHEDULE and LOG

DIVISION _____

YEAR _____

MSA Title	Brief Description	Lead Assessor	Scheduled Start Date	Scheduled Completion Date	Actual Completion Date	S/U*

Prepared by: _____

Date: _____ (Submit copy to OPA by September 1)

Associate Director

Revision #: _____

* S for scheduled MSAs

U for unscheduled MSAs - those chosen opportunistically in response to events or trends.

ATTACHMENT C

MSA ASSESSMENT PLAN TEMPLATE

Division _____ Department/Group _____ Date _____

Assessment Title _____ Assessment # _____ (obtained from OPA)

I. Purpose & Scope:

Should include a brief, concise statement defining the areas, procedures, processes, etc. that will be assessed. Note any special requirements or limitations. State the planned start and finish date for the assessment.

II. Definitions

In most assessments it is convenient to categorize results into findings, observations, and noteworthy practices. Whatever categories you plan to use should be defined here, e.g.,

Finding - non-compliance with a *requirement*.

Observation/Opportunity for Improvement - deviation from best management practices or minor deviation from procedural requirements that are isolated and considered to be a "quick fix."

Noteworthy Practice - Positive aspects of a program that could be used as a model for other similar programs across the Lab.

III. Requirements

Describe the requirements against which the assessment will be made. These could include DOE orders, EH&S Manual chapters, Work Smart Standards, work control documents (SOPs, TOSPs) division or department goals, DOE/SURA contract metrics, etc.

IV. Team Members

A list of the personnel doing the assessment. The lead assessor should be indicated.

V. Specific Areas Being Assessed

This section should include a list of the people to be interviewed, documents to be reviewed, work evolutions to be observed, etc.

VI. Final Report

State who is responsible for writing the assessment report, who will review it and the date it will be forwarded to the cognizant AD.

Prepared by _____ Date _____
Lead Assessor

ATTACHMENT D

MSA PLANNING CHECKLIST

Answering the questions in this checklist may help you plan your MSA.

1. Can you plan your assessment to build on the results of other recent assessments/inspections/reviews?
2. Have you considered pertinent information?
 - a) EH&S Manual
 - b) Performance objectives
 - c) Management systems
 - d) Resource availability
 - e) Efficiency measures
 - f) Security requirements
 - g) Benchmarking activities
3. Does your schedule for completing the assessment take into account other demands on the time of team members?
4. What tools are most appropriate for this assessment?
 - a) Interviews
 - b) Document review
 - c) Performance observations
 - d) Top level documents
 - e) Verification methods
 - f) Performance testing?
 - g) Inspection
5. What level of your area will be assessed?
 - a) Program
 - b) System
 - c) Process
 - d) Combination
6. Should you plan to evaluate the state of:
 - a) Employee knowledge
 - b) Employee motivation
 - c) Employee morale
 - d) Communication between employees and management
7. Should you evaluate the adequacy of:
 - a) Human resources
 - b) Material resources

ATTACHMENT E

MSA QUESTIONS

This list is intended to help you in the assessment process by suggesting questions you may want to consider as you plan and carry out the assessment. But if they don't help, don't use them.

1. Did you identify any gaps between the level of performance observed and the performance expected?
2. Can you identify the reasons for these gaps?
3. What are the necessary actions to close the gaps between expectations and observation?
4. Can you take steps now to close the gaps?
5. How will your actions to close any gaps be verified as effective? Can verification be firmly scheduled? Did you schedule verification?
6. Does the process meet quality and safety requirements?
7. Can the process be made more efficient or effective with respect to quality/safety requirements?
8. Are human resources effectively and properly used to achieve the objective of the activity? Of the organization?
9. Can the written procedure be followed verbatim?
10. Are the procedures followed in a manner that circumvents the requirements of the procedure?
11. Does the procedure contain the necessary requirements (contractual/regulatory)?
12. Does procedural compliance effectively implement top-level requirements?
13. Does the way the procedure is executed in any way reduce the effectiveness of the top-level requirement?
14. Do you understand the top-level requirement or where to find it?
15. Is there noncompliance in the procedure? More than one noncompliance?
16. Do any noncompliances result in failure to meet top-level requirements?
17. Does a problem identified in one process or system have the potential for existing in others (including those systems/processes under a different manager)? Which ones?
18. Did you observe any systemic management issues that are preventing customer expectations from being met?
19. Did you observe any cultural management issues that are preventing customer expectations from being met?
20. What is the state of employee knowledge?
21. What is the state of employee motivation?
22. What is the state of employee morale?
23. What is the state of employee and management communication?
24. What is the adequacy of human resources and material resources?
25. How should the process you observed be done better?
26. How should the assessment procedure be improved given what you observed this time?

ATTACHMENT F

MSA REPORT TEMPLATE

ASSESSMENT NO. _____

TITLE _____

Purpose & Scope:

Insert the scope and purpose developed during planning. Should include a brief, concise statement defining the area, procedure, work plan, boundaries and any special requirements or limitations. Include the assessment duration and team. If the purpose or scope changed from that stated in the plan, note the differences.

Summary of Assessment:

Provide a narrative summary of areas assessed. Description is to include adequate details to enable an independent reviewer to comprehend the depth and breadth of the assessment. Details to include key elements of the assessed activity or process and the status of their acceptability. When applicable, define the status of implementation of actions related to previous issues relevant to the assessed area.

Results:

Define the issues (findings, observations, noteworthy practices) identified during the assessment. All findings require corrective action to eliminate the non-conformance. Cognizant management will decide whether or not to pursue corrective actions for observations. Issues with corrective actions should be documented on a Corrective Action Form (Attachment F) and entered into CATS; the CATS identification number should be included in the report. Identify the status of each issue (open, pending or closed), issue owner, and estimated completion of required corrective and/or preventive actions. Clearly state all required follow-up actions with due dates and owners.

Effectiveness Evaluation:

State the team's conclusion on effectiveness of the area or activity assessed. When applicable, discuss the implementation of previous corrective or preventive actions in the assessment effectiveness statement.

Approval:

Performed: _____ Date: _____
Lead Assessor

Reviewed: _____ Date: _____
Associate Director

Reviewed: _____ Date: _____
Manager, Office of Performance
Assurance

ATTACHMENT G

MSA CORRECTIVE ACTION FORM

Assessment Title	Assessment No.
Requirement	
Finding or Observation	
Recommended Corrective Action	
Responsible Person	Expected Completion Date